ANMC OB/GYN COVID-19 Universal Testing Guidelines

ANMC has initiated universal COVID-19 testing for any OBGYN patient at risk for a surgical procedure and possible intubation, which is a known high-risk procedure for aerosolization of the virus. This includes preoperative COVID-19 testing within **2 days** of scheduled gynecologic surgeries, scheduled inpatient admissions for cesareans, direct admissions for induction of labor, and external cephalic versions. It also includes COVID-19 rapid testing on admission to labor and delivery or those women who are in need of an urgent or emergent gynecologic surgical procedure.

What does universal COVID-19 testing entail for surgical procedures and hospital admissions?

COVID-19 testing in 3 specific areas:

- The first involves <u>assessing patients on admission for concerning symptoms</u> or concerning exposures at the time of planning a procedure or at time of hospital admission. This list is updated frequently and includes fever, cough, symptoms of common cold, shortness of breath, and possibly also sudden loss of smell/taste, or diarrhea. Exposures include: travel outside of Alaska in the past 14 days, close contact with somebody with COVID-19, or a recent test within the past 14 days for COVID-19.
 - All patients with symptoms will be tested with a COVID-19 (In House) Rapid test and managed as a **COVID PUI.**
 - Even if the test result is negative, a PUI with a negative test must be discussed with the OBGYN physician and increased precautions may continue if there is still concern about COVID-19 and a repeat COVID test should be performed at 24 to 48 hours.
 - Do not use Nitrous Oxide
- 2. The second involves <u>outpatient testing of patients with planned direct admission for induction of labor, scheduled procedures on labor and delivery, or scheduled gynecologic procedures in the operating room.</u> COVID-19 (In House) Within 24 Hour Turn Around is ordered by the outpatient provider 2 days prior to scheduled procedure. The patient should tell the testing site that they are receiving a test for a planned procedure so that the test can be expedited in time for their admission or procedure. <u>Please see Universal Testing flow diagram for further details.</u>
- 3. The third involves testing asymptomatic patients admitted to labor and delivery or to gynecology who have not had testing in the past 2 days. COVID-19 (In House) Rapid should be ordered on admission to labor and delivery or on patients admitted for urgent gynecologic surgical procedures. For gynecologic patients who will not be having a surgical procedure, use the COVID-19 (In House) Within 24 hour Turn Around. Any of these patients will be referred to as COVID TEST PENDING ASYMPTOMATIC (CTP-A) while their inpatient test is still pending or when you do not have results or a test. The OB team should use a rapid test for active labor, fetal heart decelerations, any potential for urgent surgical intervention, or any admissions to labor and delivery who have not

had a COVID test within 2 days of admission. If women have had a prior test within 2 days of admission, they do not need a new test unless they are symptomatic or have concerning exposures.

4. What PPE is required to care safely for patients?

Asymptomatic women with a negative COVID-19 test (either Rapid or Within 24 hour Turn Around) within 2 days and no symptoms: should have standard care as long as they do not have any new symptoms or exposures and require no additional PPE requirement other than standard precautions.

Antenatal: standard precautions

Delivery:

Vaginal delivery: droplet/contact precautions (due to delivery, not COVID status). Eye Protection including face shield is highly recommended.

Cesarean delivery: droplet/contact precautions (due to delivery, not COVID status). Eye Protection including face shield is highly recommended.

Postpartum hemorrhage, other gynecologic procedures requiring intubation or at risk of intubation: same as Cesarean

Post-delivery: standard precautions

Women with: a positive COVID-19 test, inconclusive test, a COVID-PUI or Women who are Asymptomatic women with a COVID-19 test pending (CTP-A), no COVID test ordered should be under droplet/contact precautions unless there is potential for an aerosolizing procedure (e.g. vaginal delivery or cesarean because of the potential for intubation.

Antenatal: droplet/contact precautions with surgical mask, eye protection, full face shield, gown and gloves. Patient and birth partner should both wear procedure masks. Use a Labor room 4 under negative pressure if available.

Delivery:

Vaginal delivery: Airborne (N95 or PAPR), eye protection, full face shield, and gown for all staff in room. Use labor room 4 under negative pressure if available.

Cesarean delivery: Airborne (N95 or PAPR), eye protection, full face shield, gown, and gloves for all staff present in the OR. Use Cesarean room A and HEPA filter.

Postpartum hemorrhage, other procedure requiring intubation: same as Cesarean

Post-delivery: Droplet/contact precautions with surgical mask, eye protection, full face shield, gown, and gloves.

<u>Asymptomatic women with COVID-19 test pending (CTP-A), or no test ordered</u>: As a precaution, do not use Nitrous until you receive a negative COVID test result in these asymptomatic patients.

5. Outpatient and Inpatient Procedures Testing Nuances:

Per Infection control for Asymptomatic women

- Order **COVID-19 (In-House) Within 24 hour turnaround** 2 days before scheduled admissions to labor and delivery or for gynecologic surgery.
 - If test is negative perform procedure under standard isolation precautions
 - If test is positive reconsider need for procedure and if necessary, perform using airborne, contact, and eye-protection precautions
 - If the COVID-19 (In House) Within 24 hour Turn Around test is pending at time of surgery and COVID-19 (In House) Rapid test is performed and negative, then health care workers should wear a respirator mask or PAPR during aerosolizing procedure
 - ANMC Drive through testing site preferred location for testing to limit PPE use

6. What PPE is required to collect COVID-19 swabs?

The test procedure of collecting nasal swabs often induces patient coughing. Therefore, the tester must be in enhanced droplet/contact PPE with surgical mask, eye protection, face shield, gown and gloves. Airborne precautions (N95 or PAPR) are not required for the person performing a test. When testing asymptomatic patients, efforts to conserve masks and face shields should be made as safely as possible. You may continue routine care with standard precautions on asymptomatic CTP-A patients while test is pending in order to conserve PPE. See ANMC Hub guidelines around safe reuse of PPE.